

## State of Idaho **DEPARTMENT OF HEALTH AND WELFARE**

Division of Medicaid

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## BUREAU OF FACILITY STANDARDS

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## **INFORMATIONAL LETTER #97-3**

**DATE:** April 16, 1997

**TO:** All Idaho Nursing Facilities

**FROM:** John W. Hathaway, Chief

Bureau of Facility Standards

SUBJECT: MEDICATION DISTRIBUTION TECHNIQUE

CLARIFICATION TO INFORMATIONAL LETTER 96-14

On December 31, 1996, we issued an informational letter regarding documentation of medication administration. Due to concerns expressed by the long term care industry through the unofficial statewide survey as well as numerous calls to this office and Board of Nursing, we are providing the additional clarification.

This issue arose when the Board of Nursing received information that long term care facility staff were signing medications as given at the time of the medication preparation, not after the resident actually had taken the mediation. We have held three meetings with Sandra Evans, Executive Director of the Board of Nursing, to ensure that there is no confusion regarding the Board's position. Ms. Evans confirmed that the Board's expectation, and the accepted standard of practice, is that licensed nurses document those things they have done, not what they intend to do. Upon checking with Idaho nursing education programs, it was confirmed that the schools continue to instruct students to document what they have done, seen, or heard, after these events occur.

There are an unlimited number of ways a facility could meet his practice standard. One option would be to simply document only after the medication has been given. A facility could also choose to continue documenting the medication pour, provided that an additional system is developed to also document that the medications were given as poured. This additional system could be quite simple. for example, a small check could be made in the box at the time of the pour, and the nurse's initials could be added after the medication was given.

Whatever method a facility chooses, the medication administration policies and procedures should clearly outline the exact procedures nursing staff are to follow. The Department will allow facilities a period of thirty (30) days from the date of this letter to make necessary changes in their practice as well as the policy/procedure.

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This clarification was discussed in a joint meeting with representatives of the Idaho Health Care Association, the Idaho Board of Nursing, and Facility Standards staff. If you have questions regarding this matter, please contact this Loretta Todd or Debra Ransom at 334-6626, or the Idaho Board of Nursing.

JOHN W. HATHAWAY, Chief Bureau of Facility Standards

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cc: Idaho Heath Care Association Idaho Board of Nursing